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Introduction

You must follow this guidance to purchase medical commodities with USAID/BHA funds, including pharmaceuticals (human or veterinary), medical equipment, and/or medical supplies. All medical commodities are reviewed for appropriateness for the activity, for the situation, and for the country. In addition, pharmaceuticals are a USAID restricted good and have more rigorous review and approval procedures to ensure safety, effectiveness, and quality of the products when provided to beneficiaries.

Not all pharmaceuticals are allowable with USAID/BHA funding. The following are generally NOT funded by USAID/BHA, so contact BHA if you intend to include them.

- Antiretroviral medicines (ARVs) or RDTs for HIV/AIDS. Requests for these items must be coordinated with the President's Emergency Program for AIDS Relief (PEPFAR) program;
- Anti-tuberculosis medicines; and
- Contraceptives and condoms – Requests for these items must be coordinated with USAID's Office of Population and Reproductive Health (PRH)

Definitions

Biological: Products derived from living organisms, including immunobiologicals (such as vaccines), hormones, and blood products (immunoglobulins, albumin, etc.).

Disposition: This term refers to what happens to the pharmaceuticals and medical commodities purchased for the activity that remain unused when your organization determines there is no longer a need or the award is completed. There are three forms of disposition:

Donation: The giving of pharmaceuticals and/or medical commodities from one entity (NGO, PIO, or host nation) to another free of charge.

Transfer: The movement of pharmaceuticals and/or medical commodities from one project to another within the same organization.

Destruction: The rendering of the pharmaceuticals and/or medical commodities unfit for human or veterinary medical use. (This is usually because the commodities have been damaged or are expired.)

FDA-Licensed Products: This term refers to products approved by the U.S. Food and Drug Administration (FDA) for market use in the United States that have been produced in a manufacturing facility inspected and licensed by the FDA. FDA-approved products may be manufactured in a non-U.S. facility provided that the facility has been inspected and meets FDA requirements. The FDA is comprised of six centers, each of which oversee specific product areas:

- Center for Biologics Evaluation and Research,
- Center for Devices and Radiological Health,
- Center for Drug Evaluation and Research,
- Center for Food Safety and Applied Nutrition,
- Center for Tobacco Products, and
- Center for Veterinary Medicine.

Kit: A generic term referring to a collection of pharmaceuticals, supplies, and/or equipment for a specific purpose. Kits often contain USAID-restricted commodities such as oral rehydration salts (ORS) or other pharmaceuticals.
Kits may be

- Internationally recognized and standardized (e.g., the World Health Organization's [WHO] Interagency Emergency Health Kit, frequently referred to as IEHK, or the Interagency Reproductive Health Kits for Crisis Situations), or
- Unique, non WHO-standardized (e.g., hygiene kits, first aid kits, community animal health worker kits).

Medical Commodities: A collective term to include pharmaceuticals, consumable medical supplies, and durable medical equipment.

Medical Equipment (Durable): This term refers to commodities designed for humans or animals that may generally be reused after proper cleaning and disinfection. Medical equipment includes but is not limited to

- Sphygmomanometers
- Exam tables
- Surgical equipment

- EKG machines
- Weighing scales for animals or humans
- Animal hoof knives or trimmers

Medical Supplies (Consumables): This term refers to commodities that are disposed of after treating a patient or animal. Medical supplies include, but are not limited to, such items as

- Single-use syringes
- Bandages
- Tongue depressor blades
- Suture materials
- Surgical and exam gloves

Non-Prequalified Pharmaceutical Vendors: These are pharmaceutical vendors that have not been audited and approved by USAID. Although these vendors may in fact carry safe, effective, quality human and/or veterinary pharmaceuticals and vaccines, a case-by-case evaluation must be made. This stringent process may take weeks, if not months, to complete and is dependent upon how quickly required documentation from vendors is provided to USAID/BHA for review.

Oral Rehydration Salts (ORS): A glucose-based salt solution used to treat or prevent dehydration from diarrhea from any cause, including cholera, and in individuals of any age.

Pharmaceutical: As defined in USAID's Automated Directives System (ADS) Glossary, a pharmaceutical is any substance intended for use in the diagnosis, cure, mitigation, treatment, or prevention of diseases in humans or animals; any substance (other than food) intended to affect the structure or any function of the bodies of humans or animals; and any substance intended for use as a component in the above. The term includes

- Drugs
- Vitamins
- ORS
- Biologicals
- Certain in-vitro diagnostic test kits (e.g., Rapid Diagnostic Tests [RDTs]).

Devices or their components, parts, or accessories are not included. If a kit or module contains any pharmaceutical(s), the whole kit or module is considered a pharmaceutical. See ADS 312 for more information.

Prequalified Pharmaceutical Vendors: Pharmaceutical vendors that have been audited by USAID/BHA and found to have met internationally accepted standards for safe, effective, and quality pharmaceuticals and approved by USAID/BHA for recipients to procure from. This list is dynamic, you are advised to refer to the updated list of Prequalified Pharmaceutical Vendors prior to requesting pharmaceutical procurements.

Rapid Diagnostic Tests (RDTs): A simple, fast way for health workers to test whether a person has a specific disease or condition (e.g., if a person with malaria-like symptoms has malaria or if a non-menstruating female is pregnant).

Restricted Goods: For the purposes of the *Pharmaceuticals and other Medical Commodities Sub-Sector* in the USAID/BHA Emergency Application Guidelines, the following medical commodities are considered restricted goods by USAID:

- Human or Veterinary Pharmaceuticals, including vaccines, ORS, and intravenous (IV) fluids;
- Specific RDTs as cited on the USAID/BHA Human EML; and
- All kits or kit modules containing pharmaceuticals.

Stringent Regulatory Authority (SRA): A drug regulatory body that closely resembles the FDA in standards utilized in its operations. Currently, countries that participate in the International Conference on Harmonization (ICH) are considered SRAs. The ICH regulatory bodies include:

- United States Food and Drug Administration (FDA);
- Japanese Ministry of Health, Labor, and Welfare;
- European Medicines Agency (EMA) centralized procedure;
- European Free Trade Area (represented by the Swiss Medic);
- European Union member states admitted prior to 1996; and
- Australian Therapeutic Goods Administration (TGA).

The Canadian drug regulatory authority, the Therapeutic Products Directorate, Health Canada, is an observer to the ICH and is also considered a stringent regulatory authority.

Procedures to Purchase Pharmaceuticals and Medical Commodities

In order to purchase medical commodities for humans or animals with USAID/BHA funds, including medical supplies, medical equipment, and/or pharmaceuticals, you must follow this guidance in accordance with ADS 312. You must report the total cost of each medical commodity type on a separate line in the budget spreadsheet of your cost application.

Pharmaceuticals: See the definition section of this document for more information on what is considered a pharmaceutical. For requests to purchase human or veterinary pharmaceuticals and/or kits containing pharmaceuticals, the following is required:

A. All pharmaceuticals proposed for procurement must be within either the USAID/BHA Human EML or Veterinary EML. Confirm products proposed for procurement are on the lists.
B. Provide an itemized list of the pharmaceutical products including the RDTs listed in the Human or Veterinary EML (e.g., cholera RDT, malaria RDT, or syphilis RDT) or any kits that contain pharmaceuticals (e.g., IEHK, Post Exposure Prophylaxis [PEP] kit, Interagency Reproductive Health kits for Crisis Situations, First Aid kits). See the Pharmaceutical and Medical Commodities [PMC] Template which identifies the required fields. The template contains several tabs. Place all products of the same category on one tab (i.e., all human pharmaceuticals on one tab; all medical supplies on one tab; all medical equipment on one tab; and all veterinary pharmaceuticals on one tab). Submit only one PMC template for the application; do not submit multiple PMC templates

based upon activity or location supported. Once all tabs are completed, save and submit the entire workbook in PDF format.

- The *Overview* tab describes the templates found on each tab;
- The *Human Pharm, RDT, & Kit* tab;
- The *Vet Pharm* tab;
- The *Med Equipment* tab; and
- The *Med Supplies* tab.

C. Using the Human *Pharm, RDT, & Kit* tab of the templates, include the following:

- Your Organization's Name;
- The Program title;
- The Country the activity is being implemented in;
- Proposed pharmaceutical vendor(s);
- Budget requested for only the procurement of the pharmaceuticals, exclusive of transportation or handling;
- Signature, printed name, and title of the individual responsible for the procurement and oversight of pharmaceuticals, and a statement that
    i. Your organization is following all importation rules and requirements, and
    ii. Your organization has received or is working to receive assurance that the host nation will allow the importation of the pharmaceuticals for use in the humanitarian response, without taxation or undue delay.

Applicants must include on the list itself the following:

- International generic name of each pharmaceutical;
- Strength and dosage form;
- Reason for use of the pharmaceutical within the activity. You must provide an explanation of why a specific pharmaceutical is being used within the proposed activity. It is not the same as the pharmaceutical product's class or category. For example, an acceptable reason for the use of amoxicillin would be for treatment of acute upper respiratory infections; whereas proposing the word "antibiotic" would not;
- Quantity. This is the number of unit-of-issue packages being requested;
- Unit-of-issue. This is how the vendor sells the product (e.g., bottle of 10, 30, 100 or 1000 tablets; bottle of 480 mL; 10 vials each 2 mL of an injectable product). It is NOT individual tablets or mL;
- Cost per unit-of-issue. This is how much each bottle of 10, 30, 1000 tablets cost in USD, or bottle of 480 mL, or each box of 10 vials each 2 mL of an injectable cost;
- Extended cost in USD. This is the quantity multiplied by cost per unit of issue; and
- Total cost in USD of the amount for all pharmaceuticals on the list.

D. Using the Vet *Pharm* tab of the templates, include the following:

- Your Organization's Name;
- The Activity title;
- The Country the activity is being implemented in;
- Proposed pharmaceutical vendor(s);

- Budget requested for only the procurement of the pharmaceuticals, exclusive of transportation or handling;
- Printed name, position/title, and signature of the individual responsible for the procurement and oversight of pharmaceuticals, and a statement that
    i. Your organization is following all importation rules and requirements, and
    ii. For programs not using vouchers as a modality, your organization has received assurance that the host nation will allow the importation of the pharmaceuticals for use in the humanitarian response, without taxation or undue delay.

The list itself must include

- International generic name and trade name of each pharmaceutical;
- Strength and dosage form;
- Route of Administration;
- Condition the pharmaceutical will treat within the activity **as well as the species of animal** (e.g., oxytetracycline for foot rot in cattle);
- Quantity. This is the number of unit-of-issue packages to be requested;
- Unit-of-issue. This is how the vendor sells the product (e.g., bottle of 10, 30, 100 or 1000 tablets; bottle of 480 mL; 10 vials each 2 mL of an injectable product). It is NOT individual tablets or mL;
- Cost per unit-of-issue. This is how much each bottle of 10, 30, 1000 of tablets costs in USD, or bottle of 480 mL, or 10 vials each 2 mL of an injectable cost;
- Extended cost in USD. This is the quantity multiplied by cost per unit of issue; and
- Total cost. The amount in USD for all pharmaceuticals on the list.

E. If you seek USAID/BHA funds to purchase an internationally standardized and recognized kit or kit module that contains pharmaceuticals, include
    - Name of the kit or module
    - Number of kits or modules being purchased
    - Cost per kit

F. If you seek USAID/BHA funds to purchase a kit **that contains pharmaceuticals** and is not internationally standardized or recognized (i.e., hygiene kits, first aid kits, NFI kits), the individual products within the kit must be identified, to include
    - Name of the kit
    - Specific contents (see details below)
    - Number of kits being purchased
    - Cost per kit.

    On the Non-Standard Kits tabs of the PMC template, list the specific contents and quantity of each product found in the kit on a separate line. An example is shown on the PMC templates.

    Kits that do not contain pharmaceuticals but contain medical supplies or medical equipment must be placed on the respective *Med Supplies* or *Med Equipment* tab.

You must still state the contents of the non-standardized kits on the Non-Standard Kits tab.

G. If you are requesting to procure pharmaceutical products not found on either the Human or Veterinary EML, describe why the specific product is required in the *Reason for Use* column. In addition to the condition being treated, you must include information such as
    1. Why products already on the Human or Veterinary EML are not acceptable;
    2. The proposed number of people or animals that will be treated with the product;
    3. The quantity required for each case (on average);
    4. If the service providers are familiar with using the product; and
    5. If the condition being treated was previously seen and how it was treated.

H. If you are requesting to use a non-prequalified pharmaceutical vendor, documentation is required supporting the safety, efficacy, and quality of the products and the vendor. The process to approve a non-prequalified pharmaceutical vendor may take weeks or months depending on the information that is provided to USAID/BHA. The following documentation must be submitted in English:
    1. Name of the pharmaceutical vendor;
    2. Point of contact;
    3. Physical address;
    4. Phone number;
    5. Email address;
    6. Website;
    7. Government documents authorizing the sale of pharmaceuticals (i.e., current licenses and/or permits);
    8. The name of any organizations that have inspected the pharmaceutical vendor within the past 24 months and a copy of the inspection or audit;
    9. A copy of the vendor's standard operating procedures related to their quality assurance program;
    10. A copy of the vendor's standard operating procedures related to their process used to select inventory of the vendor;
    11. Availability of certificates of analysis for each batch of each pharmaceutical product purchased;
    12. Assurance from the vendor that all pharmaceuticals meet international standards for quality, safety, and efficacy;
    13. Assurance that the vendor's expiration policy states that no pharmaceuticals will be sold within 12 months prior to the expiration date; and
    14. Photographs of exterior of the vendor's facility (i.e., storefront and/or warehouse), interior storage areas, exterior signage, windows, delivery and shipping docks, cold storage facility, temperature monitors, shelving systems, and pest control measures.

Other Medical Commodities: USAID/BHA reviews the appropriateness of the amount and types of medical supplies and medical equipment being requested to ensure your

organization's funding request matches the response situation and the proposed health intervention(s).

Requests to purchase human or veterinary medical supplies and/or medical equipment must be provided separately (e.g., one list of medical supplies, a separate list of medical equipment). USAID/BHA requires applicants to use the PMC Templates to address USAID/BHA requirements. The PMC template has separate tabs for each medical commodity type. A list of medical supplies would be requested on the medical supplies tab; similarly a list of medical equipment would be requested on the medical equipment tab.

If you seek USAID/BHA funds to purchase a kit or kit module that does NOT contain any pharmaceuticals but does contain items considered to be medical supplies or medical equipment (e.g., first aid kits, surgical equipment kits, community animal health worker kit), you must make the request on the respective *Med Supplies* or *Med Equipment* tab of the PMC templates depending on the majority of the components. For example, if most of the components would be considered medical supplies, as in a first aid kit, then list the kit on the *Med Supplies* tab of the PMC template. If most of the components are considered medical equipment, as in a surgical equipment kit, then list the kit on the *Med Equipment* tab of the PMC template. Specify the contents of the kit on the Non-Standard Kit tab of the PMC template.

You must identify each request with your organization's name, activity title, total cost of the commodity type, and date of submission of the list.

Each list on the appropriate tab of the PMC template must include the following information:

1. Medical supplies (also known as consumables). This includes laboratory supplies (e.g., reagents, glassware, solutions) or RDTs not on the human EML. The total cost must be entered on a separate line in the budget and marked accordingly. Using the *Med Supplies* tab of the templates, provide a detailed list of medical supplies with:
    a. Item name
    b. Quantity
    c. Total cost for the product
    d. Total cost for all medical supplies.
2. Medical equipment (also known as durable). This includes laboratory equipment (e.g., microscopes, autoclaves, hoof trimmers). The total cost must be entered on a separate line in the budget and marked accordingly. Using the *Med Equipment* tab of the templates, provide a detailed list of medical equipment with:
    a. Item name;
    b. Quantity;
    c. Total cost for the piece of equipment. If a single piece of medical equipment costs $5,000 USD or more, other requirements apply; see the next section for additional details; and
    d. Total cost for all medical equipment.

Once you complete all tabs, save and submit the entire signed workbook in PDF format.

Additional Requirements for Medical Equipment Valued at or Above $5,000 USD
In the application budget: In addition to including medical equipment in the PMC templates, any individual piece of equipment valued at or above $5,000 USD must be listed on an individual line in the activity budget under the "capital equipment budget category/equipment at or greater than $5,000 USD." Please refer to the USAID/BHA sample budget for reference.

In the application narrative: Any (medical) equipment valued at or above $5,000 USD requires additional information in the application narrative, PMC sub-sector, including

- The need for the medical equipment;
- The specifications for the medical equipment;
- Experience of healthcare personnel who will use the medical equipment; and
- Arrangements for training, maintenance, and spare parts.

Table showing which tab to use in the Pharmaceuticals and other Medical Commodities (PMC) templates

The product is:	Human Pharmaceuticals, Rapid Diagnostic Tests, and Kits/Modules containing Pharmaceuticals	Medical Equipment	Medical Supplies	Veterinary Pharmaceuticals and Kits/Modules containing Veterinary Pharmaceuticals
Human Pharmaceutical (i.e., Amoxicillin, oral rehydration salts, malaria rapid diagnostic test)	X			
Veterinary Pharmaceutical (i.e., Amitraz, fenbendazole, tick grease)				X
Either a human or veterinary piece of (medical) equipment (i.e., stethoscope, thermometer, weighing scale for baby, horn trimmer)		X		
Either a human or veterinary consumable (medical) supply (i.e., gauze, disposable gloves, disposable syringes)			X	
A Kit that contains human pharmaceuticals AND medical equipment and/or supplies (i.e., IEHK [basic] 2017, First aid kit that has paracetamol, ORS, gauze, and bandages)	X			
A kit that has no human or veterinary pharmaceuticals, but does has medical equipment (i.e., surgical blades, forceps, retractors, kidney basins)		X		
A kit that has no human or veterinary pharmaceuticals but does have consumable			X	

(medical) supplies (i.e., gauze, bandages, disposable syringes and needles, disposable gloves)				

Human Essential Medicines List (EML)

USAID/BHA has a Human Essential Medicines List (Human EML) and a separate Veterinary EML.

The Human EML is intended to

1. Simplify the pharmaceutical selection process,
2. Expedite the pharmaceutical approval process, and
3. Maximize USAID/BHA resources to provide the greatest amount of assistance to the greatest number of beneficiaries possible.

Pharmaceuticals requested for USAID/BHA-supported health activities are reviewed for appropriateness for the health intervention, the situation, and the country in addition to safety, efficacy, and quality. A pharmaceutical product's inclusion on the Human EML does NOT convey blanket approval for use. The Human EML is expected to treat the majority of the medical conditions encountered in USAID/BHA-supported health activities, although there may be exceptions. References for the Human EML include the WHO Model Lists for Essential Medicines, WHO Standard Emergency Health Kits, and the Inter-Agency Reproductive Health Kits for Crisis Situations, among others.

USAID/BHA does not traditionally support pharmaceuticals supplied by national programs, such as the expanded program for immunization (EPI) or programs focusing on family planning, HIV/AIDS, or tuberculosis.

Where appropriate, USAID/BHA supports pharmaceutical needs being met through use of the most current internationally standardized and recognized pharmaceutical kits or modules (e.g., IEHK; or Interagency Reproductive Health kits for Use in Crisis situations). Prolonged crisis or complex emergency projects should not continue to rely on the use of large standardized kits, but should evolve to a more targeted approach to the situation.

Using the Human EML

The USAID/BHA Emergency Application Guidelines provide information on what is required when submitting a request to USAID/BHA to purchase pharmaceuticals.

You must base your selection of pharmaceuticals on the Human EML. The proposed pharmaceuticals and the proposed reason for use will be reviewed for appropriateness for the proposed activity. It is important to note, within the Human EML, there are a special group of pharmaceuticals known as 'Restricted Use Pharmaceuticals'. This is the only use that should be written in the *Reason for Use* column of the template. If one of these products is needed to treat another indication, a detailed explanation supporting that reason must be submitted. Procurement of the pharmaceutical for the 'non-restricted use' indication is not allowed unless approved.

BHA supports procurement of some internationally standardized kits or kit modules, including WHO standard emergency health kits and Interagency Reproductive Health Kits for Crisis Situations. As these kits and modules are frequently updated, please consult BHA for kits or modules that are currently supported.

If you wish to purchase pharmaceuticals that are not on the Human EML or request an alternative use for one designated as a restricted-use product (noted below highlighted in yellow), you must request an exception by providing the following information:

1. Submit a request explaining the need based upon a specific disease condition and data;
2. Your organization's headquarters-level responsible physician must sign, as indicated in the USAID/BHA Emergency Application Guidelines;
3. Within your request, separate justifications are required for each pharmaceutical product for which you seek exemption;
4. Requests for exception (and supporting justifications) must be submitted each time the procurement of the product is requested;
5. Review of the exception(s) may slow the overall approval process and does not guarantee approval. If an exception is approved, you may proceed with procurement; and
6. You must track in your activity performance reports the use of any product with a restricted use indication and/or any non-USAID/BHA Human EML product including the number of patients treated for the specific indication.

Alphabetical Listing of Pharmaceutical Products

Restricted products highlighted in yellow

Product Name	*EML Category Number(s)*
Acetazolamide	EML 21
Acetylsalicylic acid	EML 2 1; EML 12
Acyclovir	EML 6 4; EML 21
Adrenaline	see Epinephrine
Albendazole	EML 6 1
Amitriptyline	EML 2 3; EML 24
Amlodipine	EML 12
Amodiaquine	EML 6 5 3
Amoxicillin	EML 6 2
Amoxicillin + clavulanic acid	EML 6 2
Amphotericin B	EML 6 3; EML 6 5 2
Ampicillin	EML 6 2
Artemether	EML 6 5 3
Artemether + lumefantrine	EML 6 5 3
Artesunate	EML 6 5 3
Artesunate + amodiaquine	EML 6 5 3
Artesunate + mefloquine	EML 6 5 3
Ascorbic acid	EML 27
Atenolol	EML 12
Atracurium	EML 20
Atropine	EML 1 3; EML 4; EML 21
Azithromycin	EML 6 2
Beclomethasone	EML 25
Benzathine benzylpenicillin	EML 6 2
Benznidazole	EML 6 5 4
Benzyl benzoate	EML 13
Benzylpenicillin	EML 6 2
Betamethasone	EML 13
Bisoprolol	EML 12
Budesonide	EML 25
Bupivacaine	EML 1 2
Calamine	EML 13
Calcium gluconate	EML 4
Carbamazepine	EML 5; EML 24
Carvedilol	EML 12
Cefalexin	EML 6 2
Cefazolin	EML 6 2
Cefixime	EML 6 2
Ceftriaxone	EML 6 2
Charcoal, activated	EML 4
Chloramphenicol	EML 6 2
Chloroquine	EML 6 5 3
Chlorpheniramine	EML 3
Chlorpromazine	EML 24
Cholera Rapid Diagnostic Test (RDT)	EML 0
Ciprofloxacin	EML 6 2

Product Name	*EML Category Number(s)*
Clopidogrel	EML 12
Clotrimazole	EML 6 3
Cloxacillin	EML 6 2
Cyclopentolate	EML 21
Dexamethasone	EML 2 3; EML 3; EML 17
Diazepam	EML 2 3; EML 5; EML 24
Dicloxacillin	EML 6 2
Diethylcarbamazine	EML 6 1
Digoxin	EML 12
Diloxanide	EML 6 5 1
Docusate	EML 2 3; EML 17
Doxycycline	EML 6 2; EML 6 5 3
Eflornithine	EML 6 5 4
Enalapril	EML 12
Enoxaparin	EML 10
Epinephrine	EML 3;EML 12; EML 25
Ergometrine	EML 22
Erythromycin	EML 6 2
Ferrous salt	EML 10
Ferrous salt + folic acid	EML 10
Fluconazole	EML 6 3
Fluorescein	EML 14
Fluoxetine	EML 2 3; EML 24
Folic acid	EML 10
Furosemide	EML 12; EML 16
Gentamicin	EML 6 2; EML 21
Glibenclamide (glyburide)	EML 18
Gliclazide	EML 18
Glucagon	EML 18
Glucose	EML 26
Glucose with sodium chloride	EML 26

Glyceryl trinitrate	EML 12
Haloperidol	EML 2 3; EML 24
Halothane	EML 1 1
Heparin	EML 10
Homatropine	EML 21
Hydralazine	EML 12
Hydrochlorothiazide (HCTZ)	EML 12;EML 16
Hydrocortisone	EML 3; EML 13
Hydroxocobalamin	EML 10
Hyoscine	EML 2 3; EML 17
Product Name	*EML Category Number(s)*
Ibuprofen	EML 2 1
Insulin (soluble)	EML 18
Insulin, intermediate acting	EML 18
Ipratropium bromide	EML 25
Isoflurane	EML 1 1
Isosorbide dinitrite	EML 12
Ivermectin	EML 6 1
Ketamine	EML 1 1
Levothyroxine	EML 18
Lidocaine	EML 1 2; EML 12
Lidocaine + epinephrine	EML 1 2
Lithium carbonate	EML 24
Loratadine	EML 3
Lorazepam	EML 5
Magnesium sulfate	EML 5
Malaria Rapid Diagnostic Test (RDT)	EML 0
Mebendazole	EML 6 1
Mefloquine	EML 6 5 3
Meglumine antimoniate	EML 6 5 2
Melarsoprol	EML 6 5 4
Metformin	EML 18
Methyldopa	EML 12
Metoclopramide	EML 2 3; EML 17
Metoprolol	EML 12
Metronidazole	EML 6 2;EML 6 5 1
Miconazole	EML 13
Midazolam	EML 1 3; EML 2 3; EML 5
Miltefosine	EML 6 5 2
Misoprostol	EML 22
Morphine	EML 1 3; EML 2 2

Mupirocin	EML 13
Naloxone	EML 4
Neostigmine	EML 20
Niclosamide	EML 6 1
Nifedipine	EML 22
Nifurtimox	EML 6 5 4
Nitrofurantoin	EML 6 2
Nitroglycerin	See Glyceryl trinitrate
Nitrous oxide	EML 1 1
Nystatin	EML 6 3
Ofloxacin	EML 21
Omeprazole	EML 17
Product Name	*EML Category Number(s)*
Ondansetron	EML 2 3;EML 17
Oral rehydration salts (ORS)	EML 17; EML 26
Oxytocin	EML 22
Paracetamol	EML 2 1
Paromomycin	EML 6 5 2
Pentamidine	EML 6 5 4
Permethrin	EML 13
Phenobarbital	EML 5
Phenoxymethylpenicillin	EML 6 2
Phenytoin	EML 5
Phytomenadione	EML 10
Pilocarpine	EML 21
Potassium Chloride	EML 26
Potassium iodide	EML 18
Potassium permanganate	EML 13
Praziquantel	EML 6 1
Prednisolone	EML 3; EML 21
Prednisone	EML 3
Primaquine	EML 6 5 3
Procaine benzylpenicillin	EML 6 2
Proguanil	EML 6 5 3
Propofol	EML 1 1
Propylthiouracil	EML 18
Protamine sulfate	EML 10
Pyrantel	EML 6 1
Quinine	EML 6 5 3
Retinol	EML 27

Risperidone	EML_24
Salbutamol	EML_25
Selenium sulfide	EML_13
Senna	EML_2_3; EML_17
Silver sulfadiazine	EML_13
Simvastatin	EML_12
Sodium chloride	EML_26
Sodium hydrogen carbonate	EML_26
Sodium lactate compd solution	EML_26
Sodium stibogluconate	EML_6_5_2
Spironolactone	EML_12; EML_16
Sulfadoxine+pyrimethamine	EML_6_5_3
Sulfamethoxazole+trimethoprim	EML_6_2
Suramin sodium	EML_6_5_4
Suxamethonium (succinylcholine)	EML_20
Syphilis Rapid Diagnostic Test (RDT)	EML_0
Terbinafine	EML_13
Tetracaine	EML_21
Tetracycline	EML_21
Thiopental	EML_1_1
Timolol	EML_21

Product Name	*EML Category Number(s)*
Tinidazole	EML_6_5_1
Tranexamic acid	EML_10
Triclabendazole	EML_6_1
Trimethoprim	EML_6_2
Tropicamide	EML_14
Valproic acid	EML_5;EML_24
Vecuronium	EML_20
Verapamil	EML_12
Warfarin	EML_10
Water for injection	EML_26
Zinc sulfate	EML_17

PRODUCTS RESTRICTED FOR ONLY SPECIFIC INDICATION

The following pharmaceuticals are restricted for use only for the specified indications. USAID/BHA selected these indications on the basis of current and estimated future public health relevance, and potential for safe and cost-effective treatment. The products may only be used for the specified condition, unless express written USAID/BHA approval is otherwise given.

	Pharmaceutical Product	Restricted Use Indication
1	Azithromycin	For single-dose treatment of genital *Chlamydia trachomatis* and trachoma only; unless obtained as part of a standardized kit (and then to be used as indicated in the kit)
2	Cefazolin	For surgical prophylaxis and post-surgical infections
3	Cefixime	For single-dose treatment of uncomplicated anogenital gonorrhea only; unless obtained as part of a standardized kit (and then to be used as indicated in the kit)
4	Hydralazine	For acute management of severe pregnancy-induced hypertension
5	Magnesium sulfate	For eclampsia and severe pre-eclampsia
6	Methyldopa	For management of pregnancy-induced hypertension
7	Misoprostol	a. *Oral tablet* - for use of incomplete abortion and miscarriage, and for prevention of postpartum hemorrhage where oxytocin is not available or cannot be safely used b. *Vaginal tablet* - for use of induction of labor where appropriate facilities are available

Kits Containing Pharmaceuticals
Internationally recognized & standardized are no longer specifically included in the EML. BHA supports procurement of some internationally standardized kits or kit modules, including those listed among WHO standard emergency health kits and Interagency Reproductive Health Kits for Crisis Situations.
0. Rapid Diagnostic Tests (RDTs)
Cholera
Malaria
Syphilis
1. Anesthetics
1.1 General anesthetics and oxygen
Halothane
Isoflurane
Ketamine
Nitrous oxide
Propofol (or thiopental as alternative)
1.2 Local anesthetics
Bupivacaine
Lidocaine
Lidocaine + epinephrine (adrenaline)
1.3 Preoperative medication and sedation for short-term procedures
Atropine
Midazolam
Morphine
2. Medicines for pain and palliative care
2.1 Non-opioids and non-steroidal anti-inflammatory medicines (NSAIMs)
Acetylsalicylic acid

Ibuprofen
Paracetamol
2.2 Opioid analgesics
Morphine
2.3 Medicines for other common symptoms in palliative care
Amitriptyline
Dexamethasone
Diazepam
Docusate
Fluoxetine
Haloperidol
Hyoscine
Metoclopramide
Midazolam
Ondansetron
Senna
3. Antiallergics and medicines used in anaphylaxis
Chlorpheniramine
Dexamethasone
Epinephrine (adrenaline)
Hydrocortisone
Loratadine
Prednisolone
Prednisone
4. Antidotes and other substances used in poisonings
Atropine

Calcium gluconate
Charcoal, activated
Naloxone
5. Anticonvulsants/antiepileptics
Carbamazepine
Diazepam
Lorazepam
Magnesium sulfate - Restricted only for use in eclampsia and severe pre-eclampsia
Midazolam
Phenobarbital
Phenytoin
Valproic acid (sodium valproate)
6. Anti-infective medicines
6.1 Anthelminthic
Albendazole
Diethylcarbamazine
Ivermectin
Mebendazole
Niclosamide
Praziquantel
Pyrantel
Triclabendazole
6.2 Antibacterials
Amoxicillin
Amoxicillin + clavulanic acid
Ampicillin
Azithromycin – Restricted only for use in single-dose treatment of genital *Chlamydia*

trachomatis and of trachoma
Benzathine benzylpenicillin
Benzylpenicillin
Cefalexin
Cefazolin – Restricted only for use in surgical prophylaxis and surgical related infections
Cefixime – Restricted only for use in single-dose treatment of uncomplicated anogenital gonorrhea
Ceftriaxone
Chloramphenicol
Ciprofloxacin
Clindamycin
Cloxacillin
Dicloxacillin
Doxycycline
Erythromycin
Gentamicin
Metronidazole
Nitrofurantoin
Phenoxymethylpenicillin
Procaine benzylpenicillin
Sulfamethoxazole + trimethoprim (SMZ/TMP)
Trimethoprim
6.3 Antifungal medicines
Amphotericin B
Clotrimazole
Fluconazole
Nystatin

6.4 Antiviral medicines
Acyclovir
Antiretrovirals (ARVs) - ONLY complete post-rape post exposure preventive (PEP) kits are authorized for procurement and use. Only FDA approved or tentatively-approved antiretrovirals are acceptable. Antiretrovirals are only for post rape or body fluid/occupational exposure. This ensures complete treatment protocol (and meds) are obtained and in appropriate quantities. Refer to Interagency Reproductive Health Kits for Crisis Situations or current IEHK for appropriate modules.
6.5 Antiprotozoal medicines
6.5.1 Antiamoebic and antigiardiasis medicines
Diloxanide
Metronidazole
Tinidazole
6.5.2 Antileishmaniasis medicines
Amphotericin B
Miltefosine
Paromomycin
Sodium stibogluconate or meglumine antimoniate
6.5.3 Antimalarial medicines – All anti-malarials must be <u>included in the WHO malaria treatment guidance</u> and meet one of the following: (1) FDA or Stringent Regulatory Authority (SRA) approval; or (2) Prequalification by the WHO; or (3) Purchased from a USAID/BHA prequalified pharmaceutical vendor. Specific treatments must be in accordance with global and national treatment guidelines and resistance patterns. Please note requirements on use of specific products in combination/together. Medicines for the treatment of *P. falciparum* malaria cases must be used in combination.
Amodiaquine - Only in combination with artesunate 50 mg
Artemether - Only for the management of severe malaria
Artemether + lumefantrine
Artesunate - To be used in combination w/either amodiaquine, mefloquine, <u>or</u> sulfadoxine + pyrimethamine
Artesunate + Amodiaquine

Artesunate + mefloquine
Chloroquine - Restricted use only for the treatment of P.vivax infection where not resistant
Doxycycline - To be used in combination with quinine
Mefloquine - Only in combination with artesunate 50mg
Primaquine - Only to achieve radical cure of P.vivax and P.ovale infections, given for 14 days
Quinine - Only for management of severe malaria, and in combination with doxycycline
Sulfadoxine + pyrimethamine - Only in combination with artesunate 50 mg
Proguanil – Only in combination with chloroquine
6.5.4 Antitrypanosomal medicines
Benznidazole
Eflornithine – Treatment of *Trypanosoma brucei gambiense*
Melarsoprol
Nifurtimox – Used in combination with eflonithine, for treatment of *Trypanosoma brucei gambiense*
Pentamidine – Only for treatment of *Trypanosoma brucei gambiense*
Suramin sodium – Only for treatment of initial phase of *Trypanosoma brucei rhodesiense*
7. Antimigraine medicines - Migraine specific products are not supported in USAID/BHA activities
8. Antineoplastics and immunosuppressives - None on USAID/BHA EML
9. Antiparkinsonism medicines - None on USAID/BHA EML
10. Medicines affecting the blood
Enoxaparin
Ferrous salt
Ferrous salt + folic acid
Folic acid
Heparin sodium

Hydroxocobalamin
Phytomenadione
Protamine sulfate
Tranexamic acid
Warfarin
11. Blood products of human origin and plasma substitutes - None on USAID/BHA EML
12. Cardiovascular medicines
Acetylsalicylic acid
Amlodipine
Atenolol
Bisoprolol
Carvedilol
Clopidogrel
Digoxin
Enalapril
Epinephrine (adrenaline)
Furosemide
Glyceryl trinitrate (nitroglycerin)
Hydralazine - Restricted only for use in acute management of severe pregnancy-induced hypertension
Hydrochlorothiazide
Isosorbide dinitrate
Lidocaine
Lisinopril
Methyldopa - Restricted only for use in the management of pregnancy-induced hypertension
Metoprolol
Simvastatin

Spironolactone
Verapamil
13. Dermatological medicines - topical
Betamethasone
Benzyl benzoate
Calamine
Hydrocortisone
Miconazole
Mupirocin
Permethrin – • Permethrin carries significant pharmacological and environmental risks. If permethrin is proposed in your pharmaceutical request list, please provide information about how these risks will be minimized: ○ specific instructions to beneficiaries regarding proper application ○ specific instructions to beneficiaries regarding safe storage away from children, etc. ○ specific instructions to beneficiaries about proper disposal of the empty containers ○ storage of the product prior to dispensing (i.e., in warehouse or health facility) will be implemented; and ○ disposal plans for safe environmental disposal (i.e., are beneficiaries returning the empty containers for collection; are empty containers being disposed of in 'general' garbage; etc.)
Potassium permanganate
Selenium sulfide
Silver sulfadiazine
Terbinafine
14. Diagnostic agents - ophthalmic preparations
Fluorescein
Tropicamide
15. Disinfectants and antiseptics - Products such as alcohol-based hand rubs, chlorhexidine, chloroxylenol, ethanol, glutaral, polyvidone iodine, or chlorine base compound must NOT be included in the pharmaceutical list but rather in the Medical Supply list.
16. Diuretics

Furosemide
Hydrochlorothiazide
Spironolactone
17. Gastrointestinal medicines
Dexamethasone
Docusate
Hyoscine
Metoclopramide
Omeprazole
Ondansetron
Oral rehydration salts (ORS) – must be specified as the **low osmolarity** formulation Powder for dilution: in 200ml; 500ml; and 1L Must be the following composition: Glucose 75mEq or mmol/L Sodium 75mEq or mmol/L Chloride 65 mEq or mmol/L Potassium 20mEq or mmol/L Citrate 10 mmol/L Osmolarity 245 mOsm/L Glucose 13.5 g/L Sodium chloride 2.6 g/L Potassium chloride 1.5 g/L Trisodium citrate dihydrate+ 2.9/L +trisodium citrate dihydrate may be replaced by sodium hydrogen carbonate (sodium bicarbonate) 2.5g/L; however, it must only be used when product will be immediately consumed.
Senna
Zinc sulfate – Only as adjunct to ORS
18. Hormones - Other endocrine medicines and contraceptives
Glibenclamide
Gliclazide
Glucagon
Insulin (soluble)

Intermediate-acting Insulin
Levothyroxine
Metformin
Potassium iodide
Propylthiouracil
19. Immunologicals
Vaccines – USAID/BHA supports WHO and UNICEF for the procurement of vaccines.
20. Muscle relaxants (peripherally-acting) and cholinesterase inhibitors
Atracurium
Neostigmine
Suxamethonium (succinylcholine)
Vecuronium
21. Ophthalmological preparations
Acetazolamide
Acyclovir ointment
Atropine
Cyclopentolate
Gentamicin
Homatropine
Ofloxacin
Pilocarpine
Prednisolone
Tetracaine
Tetracycline
Timolol
22. Oxytocics and antioxytocics
Ergometrine

Misoprostol Oral Tablet - Restricted only for use in cases of incomplete abortion and miscarriage, and for prevention of postpartum hemorrhage where oxytocin is not available or cannot be safely used. Vaginal tablet - Restricted only for use of induction of labor where appropriate facilities are available.
Nifedipine
Oxytocin
23. Peritoneal dialysis solution - None on USAID/BHA EML
24. Medicines for mental and behavioral disorders
Amitriptyline
Carbamazepine
Chlorpromazine
Diazepam
Fluoxetine
Haloperidol
Lithium carbonate
Risperidone
Valproic acid (sodium valproate)
25. Medicines acting on the respiratory tract
Beclomethasone
Budesonide
Epinephrine (adrenaline)
Ipratropium bromide
Salbutamol
26. Solutions correcting water, electrolyte, and acid-base disturbances – oral and intravenous
Glucose
Glucose with sodium chloride
Oral rehydration salts - See Section 17.5.1 for specific content formulation
Potassium chloride
Sodium chloride
Sodium hydrogen carbonate

Sodium lactate, compound solution
Water for injection
27. Vitamins and minerals
Ascorbic acid
Retinol
28. Ear, Nose and Throat conditions in children - None on USAID/BHA EML
29. Specific medicines for neonatal care - None on USAID/BHA EML
30. Medicines for disease of joints - None on USAID/BHA EML

Veterinary Essential Medicines List

Introduction

Similar to the Human EML, USAID/BHA developed the Veterinary Essential Medicines List (Vet EML) to

- Simplify the veterinary pharmaceutical product selection process for USAID/BHA-supported animal health activities by NGO and PIO partners, and
- Expedite the USAID/BHA review and procurement approval for the veterinary pharmaceuticals requested.

USAID/BHA developed the Vet EML based on an analysis of veterinary pharmaceuticals frequently requested by partners, disaster situations involving livestock, standards of the World Organization for Animal Health (OIE), and veterinary reference manuals. It was extensively reviewed by experts and organizations that provide livestock-related humanitarian assistance.

A pharmaceutical product's inclusion in the Vet EML does NOT convey blanket approval for use. Pharmaceuticals requested for USAID/BHA-supported animal health activities are reviewed for appropriateness in terms of the proposed intervention, the situation, and the country, in addition to safety, efficacy, and quality. Species and other restrictions indicated in the list are USAID/BHA-specific and do not reflect the restrictions of any particular country.

The Vet EML is not an exhaustive list. Rather, it is purposefully limited to those pharmaceuticals considered essential for animal health activities in a humanitarian context. The Vet EML is expected to treat the majority of the animal health conditions encountered in USAID/BHA-supported animal health activities.

USAID/BHA welcomes feedback on the Vet EML at BHA.TPQ.Agriculture@usaid.gov and BHA.TPQ.Pharmacists@usaid.gov.

Using the Vet EML

The USAID/BHA Emergency Application Guidelines provide information on what is required when submitting a request to USAID/BHA to purchase veterinary pharmaceuticals. Detailed, additional guidance on the required procedures to procure pharmaceuticals are included in this guidance document. A sample template is included in the USAID/BHA Pharmaceutical Templates. You must base your selection of pharmaceuticals on the Vet EML. The choice on what pharmaceuticals to include in a project must be made by a qualified animal health professional.

If you wish to purchase pharmaceuticals that are not on the Vet EML, you must request an exception providing the following information:

1. Submit a request explaining the need based upon a specific disease condition and data;

2. Your organization's headquarters-level responsible veterinarian must sign, as indicated in the *USAID/BHA Emergency Application Guidelines*;
3. Within your request, separate justifications are required for each pharmaceutical product for which you seek exemption;
4. Requests for exception (and supporting justifications) must be submitted each time the procurement of the product is requested;
5. Review of the exception(s) may slow the overall approval process and does not guarantee approval. If exception is approved; you may proceed with procurement; and
6. You must track in your activity performance reports the use of any non-Vet EML product including the number of animals treated for the specific indication.

CAHW training must cover standards for use and management of pharmaceuticals that will be included in the CAHW kit. This includes prudent use principles as outlined in OIE terrestrial code, Chapter 6.9. Monitoring of the Quantities and Usage Patterns of Antimicrobial Agents in Food-Producing Animals

Animal Health Service Providers (AHSPs)

USAID/BHA requires its recipients to adhere to the standards set forth in the Livestock Emergency Guidelines and Standards (LEGS) for any livestock-based humanitarian responses. For the provision of animal health services, LEGS encourages recipients to use market-based payment modalities that connect to local private veterinary pharmacies (PVPs) for drug resupply. These market-based modalities ensure that private sector actors remain in business throughout a disaster, capable of supporting beneficiaries once humanitarian interventions end.

As referenced in the USAID/BHA Emergency Application Guidelines, the use of vouchers for the support of beneficiary access to animal health services may be considered, pending Livestock and Pharmaceutical & Medical Commodities advisors review and approval. However, USAID/BHA does not allow for the use of cash, either multi-purpose or restricted, for this purpose.

In line with the LEGS core standards on preparedness and technical capacity, recipients need to have the following in place *prior* to an emergency in order to successfully implement in a timely fashion a voucher-based animal health services program once an emergency occurs:

1. Wholesaler(s) that meet USAID/BHA criteria for approval;
2. PVPs with good storage, distribution, and documentation practices that are willing to engage in the voucher-based AHSP program;
3. Internal technical expertise to help wholesalers and PVPs improve their storage, distribution, and documentation practices, and to ensure that only safe, quality pharmaceuticals are used in the project;

4. Internal technical expertise to monitor project wholesalers, PVPs, and AHSPs to ensure that only safe, quality pharmaceuticals are used in the project; and
5. Internal technical capacity to adequately manage a voucher-based animal health project

BHA will consider the use of vouchers for the payment of AHSPs, and thus the procurement of veterinary pharmaceuticals, on a case-by-case basis. To be approved for a voucher- based AHSP project, a partner must comply with the USAID/BHA guidelines requirements for vouchers as detailed under the voucher keyword (section 10.20, page 2010) and complete the Veterinary Pharmaceuticals and other Medical Commodities (VPMC) subsector, including:

- An assessment of the veterinary pharmaceutical supply system,
- A description of the national certification process for veterinary pharmaceuticals and veterinary pharmaceutical vendors, and
- A project-specific pharmaceutical distribution documentation system based on wholesaler provided batch numbers; partners will have to develop this system specifically for the project, and train project PVPs in the system.

Partners will need to provide all documentation required for approval of the proposed project wholesaler(s), either prequalified or non-prequalified, as described starting on Page 5 of this document. In the Livestock Subsector, the partner must fully describe the AHSP voucher system, including:

- Detailed list of criteria for selection of participating licensed PVPs;
- Capacity building for licensed PVPs in good storage, distribution, and documentation practices;
- System to cross check used product (packaging) from CAHWs to batch numbers at PVPs against invoices provided by wholesaler;
- Training content for Community Animal Health Workers (CAHWs) (minimum 32 weeks) must include cost recovery, drug resistance, antimicrobial resistance, and tropical pest control products safety and handling;
- Voucher management system;
- Community awareness process; and
- Good storage and distribution practices monitoring for PVPs and AHSPs, including random checks of PVP premises and AHSP kits.

Veterinary Pharmaceuticals used for Topical Pest Control

Veterinary pharmaceuticals that contain pesticides are considered USAID restricted (pharmaceutical and pesticide) goods. Their procurement, transport, distribution, use, handling, management, or disposal requires special care to ensure safety of humans, non-target organisms (e.g., fish, honeybees, butterflies), and the environment. If you intend to support such commodities you must provide detailed safety and mitigation procedures that can meet the requirements of the USAID environmental compliance regulations commonly known as the Pesticide Procedures section, 22 CFR 216.3(b) and, at a minimum, prepare a Pesticide Evaluation Report and Safer Use Action Plan

(PERSUAP) that addresses all relevant points including the 12 points listed in 22 CFR 216.3(b) a-1 and outlines mandatory conditions for safer use of the proposed pesticides. Your original application must include the PERSUAP and an Initial Environmental Examination (IEE). Sample templates for the IEE and the PERSUAP are on the USAID/BHA Emergency Application Guidelines page under the *Agriculture* section. You must submit completed templates with your application for review and approval by USAID's Bureau Environmental Officer. You may not procure topical pest control until approval is received from both USAID/BHA's pharmaceutical advisor and the pests and pesticides advisor. The process for approval may take weeks or months depending on the information that is submitted to USAID/BHA.

Alphabetical Listing of Veterinary Drugs

Product Name	**Category Numbers(s)**
Acepromazine	1.2
Activated Charcoal	4.1
Albendazole	5.1
Amitraz	10.1
Amoxicillin	6.1
Amprolium furaltadone	8.1
Atropine	4.2
Bacitracin	9.1
Bismuth Subsalicylate	13.1
Calcium	14.1
Dexamethasone	3.1
Diminazene aceturate	8.2
Dioctyl sodium sulfosuccinate	13.2
Diphenhydramine	3.3
Doramectin	5.2; 01.2
Epinephrine	4.3
Fenbendazole	5.3
Furosemide	12.1
Glucose	14.2
Griseofulvin	7.1
Homidium bromide	8.3
Imidocarb diproprionate	8.4
Isometamidium chloride	8.5
Ivermectin	5.4; 10.3
Kaolin/Pectin	13.3
Lactated ringers	14.3
Levamisole	5.5
Lidocaine local anesthetic	1.3
Liquid paraffin	13.4
Magnesium sulfate	13.5
Meloxicam	2.1
Melarsomine dichlorhydrate	8.6
Miconazole	11.1
Minerals	157.1
Multivitamins	157.2
Novolsan	18.2
Parvaquone	89.7
Penicillin	67.3; 910.3
Pentobarbital	169.1
Petroleum jelly	13.3
Praziquantel	56.7
Prednisolone/Prednisone	34.2
Pyrethroids (including Permethrin, Flumethrin, Cypermethrin, Pyrethrin, deltamethrin only)	102.4
Quaternary Ammonium	11.5
Quinapyramine sulfate	89.9
Salvon	11.6
Terramycin	910.4
Tetracycline	67.4; 910.5
Tick grease	102.5
Trimethoprim	67.5
Tylosin	67.6
Vitamin B (including complexes)	15.3
Xylazine	1.1
Vitamin B	157.3
Zinc oxide	13.4

Alphabetical Listing of Veterinary Vaccine

Product Name	Category Numbers(s)
African Horse Sickness	17.1
Anthrax (Sterne-strain)	17.2
Avian influenza	17.3
Blackleg (vaccines to prevent diseases caused by *Clostridium* species, e.g., blackleg and tetanus)	17.4
Brucellosis (strain 19, RB 51, Rev1)	17.5
Camelpox	17.6
Contagious bovine pleuropneumonia (T1sr, T1/44)	17.7
Contagious caprine pleuropneumonia	17.8
East Coast fever (Theileria)	17.9
Foot and mouth disease	17.10
Fowl cholera (*Pasteurella multocida*) bacterin and vaccine	17.11
Fowlpox	17.12
Hemorrhagic septicemia (*Pasturella multocida*)	17.13
Infectious bursal disease (Gumboro disease)	17.14
Infectious Coryza	17.15
Infectious laryngotracheitis	17.16
Lumpy skin disease	17.17
Marek disease (including Newcastle, IBD, infectious laryngotracheitis, and SB-1 or 301B/1 recombinants)	17.18
Newcastle Disease (B1, LaSota)	17.19
Peste des petits ruminants	17.20
Rabies	17.21
Rift Valley fever (Smithburn, clone 13)	17.22
Sheep and goat pox	17.23
Swine erysipelas bacterin	17.24
Tuberculin	17.25

Restricted products highlighted in yellow

Pharmaceutical		Indication
1.	**Tranquilizers and Anesthetics**	
1.1	Xylazine	Only for use by veterinary diploma or degree holders.
1.2	Acepromazine	Only for use by veterinary diploma or degree holders.
1.3	Lidocaine local anesthetic	Approved for CAHW kits.
2.	**Pain and Palliative Care**	
2.1	Meloxicam	
3.	**Antiallergics**	
3.1	Dexamethasone	Only for use by veterinary diploma or degree holders.
3.2	Prednisolone/Prednisone	Only for use by veterinary diploma or degree holders.
3.3	Diphenhydramine	Only for use by veterinary diploma or degree holders.
4.	**Antidotes**	
4.1	Activated Charcoal	Approved for CAHW kits.
4.2	Atropine	Only for use by veterinary diploma or degree holders.
4.3	Epinephrine	
5.	**Anthelminthics**	
5.1	Albendazole	Not approved for pigeons, doves, or crias. Approved for CAHW kits.
5.2	Doramectin	Approved for CAHW kits.
5.3	Fenbendazole	Not approved for pigeons, doves, or crias. Approved for CAHW kits.
5.4	Ivermectin	Approved for CAHW kits.
5.5	Levamisole	Not approved for horses or related species. Approved for CAHW kits.
5.6	Piperazine	Only approved for birds. Approved for CAHW kits.
5.7	Praziquantel	Approved for CAHW kits.
6.	**Antibiotics**	
6.1	Amoxicillin	Not approved for rabbits or guinea pigs.
6.2	Oxytetracycline	20% formulation not approved for horses or related species. Approved for CAHW kits.
6.3	Penicillin (including streptomycin combinations)	Not approved for rabbits or guinea pigs. Approved for CAHW kits.
6.4	Tetracycline	Not approved for equids. Approved for CAHW kits.
6.5	Trimethoprim (including sulfonamide combinations)	Approved for CAHW kits.
6.6	Tylosin	
7.	**Anti-fungals**	

7.1	Griseofulvin	Only for use by veterinary diploma or degree holders.
8.	**Anti-protozoals**	
8.1	Amprolium furaltadone	
8.2	Diminazene aceturate	Only approved for small ruminants, and cattle and related species. Approved for CAHW kits.
8.3	Homidium bromide	Only approved for horses and related species, and cattle and related species.
8.4	Imidocarb diproprionate	Not approved for horses and related species. Approved for CAHW kits.
8.5	Isometamidium chloride	Only approved for cattle and related species. Approved for CAHW kits.
8.6	Melarsomine dichlorhydrate	Only approved for camels and related species. Approved for CAHW kits.
8.7	Parvaquone	Only approved for cattle and related species.
8.8	Quinapyramine dimethylsulfate	Not approved for cattle and related species. Approved for CAHW kits.
8.9	Quinapyramine sulfate	Not approved for cattle and related species. Approved for CAHW kits.
8.10	Surmain	Not approved for cattle and related species. Approved for CAHW kits.
9.	**Topical and ophthalmic antibiotics**	
9.1	Bacitracin (including neomycin and polymyxin B combinations)	Approved for CAHW kits.
9.2	Oxytetracycline (including polymixin B combinations)	Approved for CAHW kits.
9.3	Penicillin (including streptomycin combinations)	Approved for CAHW kits.
9.4	Terramycin	Approved for CAHW kits.
9.5	Tetracycline	Approved for CAHW kits.
10.	**Topical pest control - *See additional requirements for procurement of these drugs**	
10.1	Amitraz	Only approved for birds. Approved for CAHW kits.
10.2	Dormamectin - pour on	Approved for CAHW kits.
10.3	Ivermectin - pour on	Approved for CAHW kits.
10.4	Pyrethroids (including Permethrin, Flumethrin, Cypermethrin, Pyrethrin, deltamethrin only)	Not approved for fish or bees. Approved for CAHW kits.

10.5	Tick grease	Approved for CAHW kits.
11.	**Other Topicals**	
11.1	Miconazole	Approved for CAHW kits.
12.	**Diuretics**	
12.1	Furosemide	Only for use by veterinary diploma or degree holders.
13.	**Gastrointestinals**	
13.1	Bismuth Subsalicylate	
13.2	Dioctyl sodium sulfosuccinate	Only approved for ruminants.
13.3	Kaolin/Pectin	
13.4	Liquid paraffin	Only approved for equids.
13.5	Magnesium sulfate	Approved for CAHW kits.
14.	**Fluid therapy**	
14.1	Calcium	Only for use by veterinary diploma or degree holders.
14.2	Glucose	Only for use by veterinary diploma or degree holders.
14.3	Lactated ringers	Only for use by veterinary diploma or degree holders.
15.	**Vitamins**	
15.1	Minerals	Approved for CAHW kits.
15.2	Multivitamins	Approved for CAHW kits.
15.3	Vitamin B (including complexes)	Approved for CAHW kits.
16.	**Euthanasia**	
16.1	Pentobarbital	Only for use by veterinary diploma or degree holders.
17.	**Vaccines and Bacterins**	
17.1	African Horse Sickness	Only approved for horses and related species.
17.2	Anthrax (Sterne-strain)	Only approved for cattle and related species, and sheep.
17.3	Avian influenza	Must be matched to circulating strains.
17.4	Blackleg (vaccines to prevent diseases caused by *Clostridium* species, e.g., blackleg and tetanus)	Only approved for ruminants. Must contain the whole culture of C. chauvoei.
17.5	Brucellosis (strain 19, RB 51, Rev1)	Only for use by veterinary diploma or degree holders, with specialized training on handling brucellosis vaccine.
17.6	Camel pox	
17.7	Contagious bovine pleural pneumonia (T1sr, T1/44)	Only approved for cattle and related species in endemic countries. T1/44 not for use in Africa's Great Lakes region.
17.8	Contagious caprine pleural pneumonia	Must be matched to circulating strains.
17.9	East Coast fever (Theileria)	Sporozoite stabilate of the

	appropriate strain(s) for infection and treatment of cattle.
17.10 Foot and mouth disease	Must be type matched, and preferable if subtype matched.
17.11 Fowl cholera (*Pasteurella multocida*) bacterin and vaccine	Bacterin must be serotype matched.
17.12 Fowlpox	
17.13 Hemorrhagic septicemia	Must be matched to circulating strains of Pasteurella multocida, and Pasteurella haemolytica.
17.14 Infectious bursal disease (Gumboro disease)	
17.15 Infectious Coryza	Must be matched to circulating serovar.
17.16 Infectious laryngotracheitis	
17.17 Lumpy skin disease	
17.18 Marek disease (including Newcastle, IBD, infectious laryngotracheitis, and SB-1 or 301B/1 recombinants)	
17.19 Newcastle Disease (B1, LaSota)	
17.20 Peste des petits ruminants	Must be produced from Nigeria 75/1 seed strain.
17.21 Rabies	Must be inactivated vaccine for dogs and cats.
17.22 Rift Valley fever (Smithburn, clone 13)	Only for use by veterinary diploma or degree holders, with specialized training on handling RVF vaccine.
17.23 Sheep and goat pox	Must be live attenuated.
17.24 Swine erysipelas bacterin	
17.25 Tuberculin	Only for use in cattle and related species.

Prequalified Pharmaceutical Vendors

Several international pharmaceutical vendors have been audited and found consistently able to provide safe, effective, and quality essential medicines and other medical commodities.

These vendors are listed in alphabetical order and no endorsement is made of any particular vendor. It is up to each applicant to negotiate costs, delivery frequency, and delivery timelines.

1. Action Medeor, Germany www.medeor.de/en/
2. AmstelFarma, Netherlands www.amstelfarma.nl
3. ASRAMES, Democratic Republic of Congo www.asrames.com/en/
4. CHMP Kenya, Kenya www.chmp-kenya.org
5. IDA Foundation, Netherlands www.idafoundation.org
6. IMRES, Netherlands info@imres.nl

7. INIGO, Turkey inigoltd.com
8. Farmastar, Turkey www.farmastar.com.tr
9. Medical Export Group (MEG), Netherlands www.meg.nl
10. Mission for Essential Drugs and Supplies (MEDS), Kenya www.meds.or.ke
11. MissionPharma, Denmark www.missionpharma.com
12. Munir Sukhtian Group (MSG) Company**, Jordan Lhamdan@sukhtian.com.jo
    **Human and Veterinary products
13. UNICEF, Denmark www.unicef.org

Post-Award Assistance

Once an award containing approval for the procurement of pharmaceuticals is made, you are provided certain flexibilities within your award including flexibility to: Increase or decrease approved pharmaceutical product quantities; change dosage forms; or change dosage strength so long as the amount initially approved for pharmaceutical cost is not exceeded and no new pharmaceutical product is added. Additionally, you may select to use a different prequalified pharmaceutical vendor.

The following table illustrates what is at your discretion and what requires USAID/BHA approval:

	Allowable	**Not Allowable** (You must submit a new pharmaceutical procurement request)
Increase or decrease product quantities	X	
Change product dosage form	X	
Change product strength	X	
Change product cost (e.g., pharmaceutical cost increases after approval)		X
Add new products		X
Use a different prequalified pharmaceutical vendor	X	
Use a non-prequalified pharmaceutical vendor		X

Indicators – Intent and How to Report

There are 2 types of indicators within the PMC sub-sector: mandatory (required for all applications procuring PMC) and circumstantial (required only IF the situation applies).

The descriptions below provide further explanation, the intent of the indicator, and how to report on it. Additional guidance may be found in the PIRS.

Mandatory

- Number of people trained in medical commodity supply chain management
  - Intent: To increase the capacity of humanitarian responders with appropriate supply chain knowledge and skills.
  - How: Report the number of individuals who attended and fully participated in the entire session.
- Number of health facilities out of stock of any medical commodity tracer products, for longer than one week, seven consecutive days. (Note: In initial application, suggest and justify five tracer products critical to implementing the health activities, the stock of which will be reviewed weekly and how organization will address out of stock situations within a delivery period and longer than one delivery period.)
  - Intent: To institutionalize the practice of regularly checking stock levels of pharmaceuticals and requesting additional stock before critical (low) levels reached, and avoiding stock outs which negatively impact the delivery of health care. By selecting five (pharmaceutical) products critical to the health care being delivered the goal was these products would be closely monitored but others would by association be noted. You should not only check the levels of products but also develop contingency plans should a delivery not be received in time (e.g., working with healthcare providers to switch to a different therapeutic product, borrowing from a close-by facility, requesting an emergency delivery from warehouse). The goal being everything possible will be done to establish and maintain a consistent medical commodity supply chain, thus avoiding stock outs which negatively impact the delivery of health care.
  - How: Review the activities and care proposed, identify five products (mainly pharmaceuticals but other medical commodities may be proposed if felt to be critical). Establish a minimum shelf quantity (for the health facility) that takes into account the amount of time it would take to receive replenishment (from warehouse and/or vendor, depending). Train staff to check and note the level of the products weekly. Reorder the products in accordance with proposed ordering schedule (and hopefully using a set minimum level). If stock level of an identified tracer product falls to zero, highlight the occurrence and begin checking and noting the stock level daily until additional stock received. Also provide a written description of any contingency actions performed.

Required only if using a pharmaceutical with a restricted use indication

- Number of people treated for EACH restricted use indication
- Quantity of pharmaceuticals purchased to treat individuals for EACH restricted use indications
  - Intent: To ensure WHO's recommendations for use of the products is implemented whenever possible.
  - How: By tracking the number of patients treated and the quantities of the product procured, a cross-walk could be done to demonstrate only appropriate amounts of the product were procured. If significant quantities

above what would be necessary to treat the number of patients stated were procured, USAID/BHA may request that your organization provides an explanation and possibly reimbursement for the procurement costs. If the quantities are below those necessary to treat the number of patients, USAID/BHA may request your organization to describe the treatment protocol being used as it may reflect inadequate patient care.

Required only if approved to procure a non-USAID/BHA EML pharmaceutical

- Number of people treated with each approved non-USAID/BHA EML pharmaceutical
    - Intent: To ensure patients are only receiving the non-USAID/BHA EML product for the proposed indication
    - How: By cross-walking the number of patients treated with the quantity approved for procurement, a calculation could be made regarding adequacy and appropriateness of care.

Disposition of Pharmaceuticals

Process

1. Discuss your disposition plans with your USAID/BHA field representative.
2. Submit the official disposition request to your USAID/BHA Agreement Officer's Representative (AOR).
3. Obtain Agreement Officer (AO)'s approval prior to donating, transferring, or destroying pharmaceuticals. As they are restricted goods, all pharmaceuticals must be accounted for at the end of the activity regardless of dollar value through the following:
    a. Use the Pharmaceutical Disposition Template found on the USAID/BHA Emergency Application Guidelines page under *Pharmaceuticals*.
    b. Include all information including a signature and date on the completed Pharmaceutical Disposition Template.

Disposition of Medical Equipment and Medical Supplies

You are expected to appropriately manage your purchases of medical equipment and medical supplies with project activities, and account for any unused commodities left at the end of project activities.

Medical Equipment

Follow the same process as above except complete the *Disposition-Med Equipmen*t tab of the PMC Disposition Template listing all medical equipment valued at $5,000 USD or greater per unit and has a useful life of more than one year.

Medical Supplies

Follow the same process as above except complete the ‘Disposition-Med Supplies’ tab of the PMC Disposition Template listing all unused medical supplies that equal or exceed $5,000 USD in total aggregate fair market value.